Application for Employment – Town of North Haven



TOWN OF NORTH HAVEN Finance Office 18 Church Street North Haven, CT 06473 (203) 239-5321

EQUAL EMPLOYMENT OPPORTUNITY

THE TOWN OF NORTH HAVEN IS AN EQUAL OPPORTUNITY EMPLOYER. THIS MEANS THAT ALL APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, RELIGION, AGE, SEX, MARITAL STATUS, PREGNANCY, SEXUAL ORIENTATION, THE PRESENCE OF NON-JOB-RELATED MEDICAL CONDITION OR DISABILITY, VETERAN STATUS OR ANY OTHER LEGALLY PROTECTED CLASS.

The Application must be completed fully and accurately, even if a resume is attached, and must bear an original signature. Any applicant who provides false Information will be subject to disqualification.

_____Date Available Full Time: _____ Part Time: ____ First MI Last Address:_____ Town:______State/Zipcode_____ Telephone (home)______Work____ Cell: _____ Email: _____ Referral Source_ Personal Information: Are you legally eligible for employment in the United States? YES () NO () Are you of legal age to work? YES () NO () If you are under 18, can you provide a work permit if required? YES () NO () Are you requesting any accommodation to complete the application process? YES () NO () If yes. Please explain? Have you ever been employed by the Town of North Haven? YES () NO ()

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Position Applying for:

Educational History:	NO()		ommodation that woul		of the job applied for? YES (orm this job? YES () NO	,
Elementary High School College Trade School College Co		es, piease explain:				
Elementary High School College Trade School College Chool Name ears ompleted iploma/Degree eceived? ubjects						
chool Name ears ompleted iploma/Degree eceived? ubjects	Educational H	listory:				
rears Completed Diploma/Degree Received? Subjects		Elementary	High School	College	Trade School	Other
iploma/Degree eceived?	chool Name					
eceived? ubjects						
ubjects						
	ubjects					
						<u> </u>
Describe specialized training, apprenticeship, skills or extra-curricular activities that relate to the position for		acialized training a	nnranticachin, ckille o	r avtra curricular ac	tivities that relate to the neci	ion for

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Driver Information:

Certain positions with the Town of North Haven require requires driving, please answer the following:	employees to drive.	If you are applying for a position which	1
Do you have a valid driver's license? Yes () No ()		
If Yes - license no.	State	Expiration date	
Do you have a CDL? Yes () No () If yes, Cla	ass A or B? a	and Number	
Has your license ever been revoked or suspended?	Yes No		
Other Licenses or Skills:			
Typing skill (if applicable)WPM			
Computer skill (if applicable) list all computer systems a	ind programs you are	e proficient in:	
List office equipment you can operate (if applicable)			
Heavy equipment which you can operate (if applicable)			<u> </u>
Employment History - DO NOT LEAVE BLANK			
List below your employment history. Start with your mo	st recent employer fi	irst. Attach an additional sheet if necess	ary.
Current/Most recent Employer:	From:	To:	
Address:	Phone:		
Name & Title of Supervisor:	May we co	ontact?	
Your Title:	Salary \$ _		
Duties:			
Reason for Leaving:			
Current/Most recent Employer:			
Address:	Phone:		
Name & Title of Supervisor:	May we co	ontact?	
Your Title:	Salary \$ _		
Duties:			
Reason for Leaving:			

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Current/Most recent Employer:	From:To:	
Address:	Phone:	
Name & Title of Supervisor:	May we contact?	
Your Title:	Salary \$	
Duties:		
Reason for Leaving:		******
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Your Title:	Salary \$	
Duties:		
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Address:	Phone:	
Name & Title of Supervisor:	May we contact?	
Your Title:	Salary \$	
Duties:		
Reason for Leaving:		
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Address:	Phone:	
Name & Title of Supervisor:	May we contact?	
Your Title:	Salary \$	
Duties:		
Reason for Leaving:		

Current/Most recent Employer:		From:To:			
Address:		Phone:			
Name & Title of Supervisor:		May we contact?			
Your Title:		Salary \$			
Duties:					
Reason for Leaving:					
References			•••••••		
Name	Title	Relationship	Telephone	Number of Years	
					

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APPLICANT'S CERTIFICATIONS AND AGREEMENTS

TO ALL APPLICANTS: PLEASE READ THIS SECTION CAREFULLY AND SIGNIFY YOUR UNDERSTANDING BY SIGNING YOUR NAME IN THE SPACE PROVIDED.

I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge. I understand that any falsification or material omission of fact on this application shall lead to refusal of employment or dismissal from employment. I authorize any investigation into the statements I have made in this application as necessary to arrive at an employment decision. In consideration of my employment, I agree to conform to the rules, regulations and policies of the Town of North Haven.

I authorize representatives of the Town of North Haven to obtain pertinent information from my previous employers, references, and other persons with knowledge of my work history and background. I authorize my previous employers, references, and persons with knowledge of my work history and background to provide pertinent information to the Town of North Haven and hereby release all such persons and waive any and all claims, demand or causes of action whatsoever, in connection with the request for release of such information. I also voluntarily agree to submit to any lawful security examination or investigation as a condition precedent to employment or at any time during my employment. I hereby release the Town of North Haven, its agents and employees from any liability resulting from or in connection with the results or use of the results of any of the above described examinations, reference checks and investigations.

I understand that, as a condition precedent to employment, the Town of North Haven conducts thorough background checks (which may include a check of my criminal history) on prospective employees. I agree that, if contacted with respect to such background check, that I will fully cooperate and provide any information requested. I understand that, as a condition of my consideration for employment with the Town of North Haven, or as a condition of my continued employment with the Town of North Haven, the Town of North Haven may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to the Town of North Haven's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, the Town of North Haven will provide me with a copy of any such report if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for employment with the Town of North Haven. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

As a condition precedent to employment, I voluntarily consent to a controlled substance test in accordance with applicable law and understand that a positive and properly confirmed drug test for controlled substances or refusal to submit to a drug test is grounds for denial or termination of employment. I also voluntarily consent to a pre-employment medical examination conducted at the request of the Town of North Haven. I understand that the results of these medical examinations and tests will be provided to the Town of North Haven.

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APPLICANT'S SIGNATURE		DATE
PLEASE PRINT NAME	 	

I have read, understand and agree to the forgoing.

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